DEPARTMENT OF PUBLIC WORKS WATER AND SEWER ADMINISTRATION New Connection Services

INFORMATION REQUIRED FOR LICENSE AGREEMENT FOR INSIDE METER

Since you are requesting an inside meter, a License Agreement (Inside Meter Agreement) will be prepared by the County for the property owner's signature. Once the property owner has signed, the Agreement will be fully executed by Harford County.

This License Agreement is necessary for the appropriate County personnel to enter the premises where the equipment (water meters, back flow preventers, drain valves, etc.) is located, for the purpose of installing, reading, testing and repairing or replacing back flow preventers and drain valves. The License Agreement also provides the County with a twenty-four (24) hour access to the areas where the equipment is located in case of a water pipe break or a major leak. County personnel will need to shut off the water supply and repair, maintain and test equipment.

To prepare the License Agreement, the County must have information about the property. Please complete this form, and return it with a copy of the Deed for the property (proof of ownership) and a copy of the Articles of Corporation (if applicable) to:

New Connection Services Division of Water and Sewer 101 South Main Street Bel Air, MD 21014 410-638-3300

It is important that this information be submitted as soon as possible so the License Agreement can be prepared. Until the Agreement is completed and signed by the property owner, the work done under your Commercial Application cannot be accepted.

If you have any questions, please contact me at 638-3300. Thank you.

Aimee E. Mitchell New Connection Services

ALL APPLICABLE INFORMATION MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Location of Commerc	eial Meter: (property	to be serviced by water meter)	
Address:			
		Zip	
Tax Map:	Parcel:	Lot #:	
Deed Liber:	Folio:	(please provide a copy)	
Plat Liber:	Folio:	(please provide a copy)	
Emergency Contact po	ersons name:		
Daytime Phone #:		Evening Phone #:	
Property Owner Name	e:		-
Addre	ess:		-
		Zip	
Daytime Phone #:		Evening Phone #:	
Authorized Person S	ignature:		
Title:			
Tenants Name:			
Address:			
		Zip	
Daytime Phone #:		Evening Phone #:	_ -
If property is currently	y under a sales agree	ement complete the following.	
Name and address of J	purchaser: _		
	_	7:	
Doystima Dhara #	_	Zip	
Daytime Phone #:		Evening Phone #:	_ -